CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

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STATEMENT OF ECONOMIC INTERESTS RECEIVED PAGE

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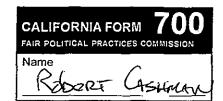
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NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)	
	Cashman	Robert	Louis	
1. Office, Agenc		in the second se	"ECE.	
Agency Name	of Wildomar		MAR 1 7 20	
•	epartment, District, if applicable	Your Position		
	1 Council	Council	var "Alycuerks,	
➤ If filling for multip	le positions, list below or on an attachment.			
Agency:		Position:		
2. Jurisdiction	of Office (Check at least one box)			
☐ State		☐ Judge (Statewide Jurisdiction	☐ Judge (Statewide Jurisdiction)	
Multi-County			County of	
Xcity of Wildomar		Other		
3. Type of State	ement (Check at least one box)			
Annual: The 2010.	period covered is January 1, 2010, through Decemi	ber 31, Leaving Office: Date Left _ (Check one)		
The period 2010.	covered is/, through Decemb	oer 31, O The period covered is January leaving office.	nuary 1, 2010, through the date of	
Assuming Off	fice: Date/	 The period covered is of leaving office. 	, through the date	
Candidate: E	lection Year Office sought	t, if different than Part 1:	<u> </u>	
4. Schedule Sur	nmary	······································		
	schedules or "None."	► Total number of pages including this	s cover page:	
Schedule A-1	- Investments - schedule attached	Schedule C - Income, Loans, & B	usiness Positions - schedule attached	
	- Investments - schedule attached	Schedule D - Income – Gifts – sc		
Schedule B - I	Real Property – schedule attached	Schedule E - Income – Gifts – Tra	evel Payments - schedule attached	
	-or- None - No reportable	interests on any schedule		
5. Verification				
Date Signed	3/17/11 (month, day, year)	Signature		

SCHEDULE D Income - Gifts



► NAME OF SOURCE	► NAME OF SOURCE	
Burke, Williams, & Sorensen, LLP	-	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
2280 Market Street, Ste 300, Riverside, CA 92591		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
Law Office		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
09 , 16 , 10		
12 , 13 , 10 s 40.00 Chocolate Pizza	\$	
	\$	
► NAME OF SOURCE	► NAME OF SOURCE	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
► NAME OF SOURCE	NAME OF SOURCE	
ADDRESS (Business Address Acceptable).	ADDRESS (Business Address Acceptable)	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
\$		
	\$	
Comments:		